Application or Docket Number

10/019446

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY /		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(00.011.11					RATE	FEE	1	RATE	FEE
FOR			NUMBER F	FILED	NUMBI	ER EXTRA		BASIC FEE	7 6	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			// minus 20=		•			X\$ 9=	17.2	OR	X\$18=	
IND	EPENDENT CL	AIMS	minus 3 =		•			X42=			X84=	
<u> </u>	LTIPLE DEPEN	_ <u>~</u>	<u> </u>				A42=		OR			
								+140=	رين	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	440	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						(Oak.ma 6)		SMALL	ENTITY	OR	OTHER SMALL	
		(Column 1) CLAIMS	(Colui		(Column 3)	1 r	OMACE.) 		ADDI-	
ENT A		REMAINING AFTER AMENDMENT		NUM PREVK PAID	BER OUSLY	PRESENT EXTRA	ŀ	RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
MON	Total	. 8	Minus	** 0	55	=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	• /	Minus	***	<u>ජ</u>		H	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDEN	CLAIM			+140=,		OR	+280=	
				•			L	TOTAL			TOTAL	
			ADDIT. FEE			ADDIT. FEE						
		(Column 1) CLAIMS		(Colu	ÆST	(Column 3)	1		ADDI-	l.		ADDI-
AMENDMENT B	· ·	REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE"	TIONAL
MON	Total	*	Minus	tr		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***	- 1	<u> </u>		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
					,			TOTAL		00	TOTAL	
		•			•	•	,	ADDIT, FEE		JON	ADDIT. FEE	-
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQ	Total	*	Minus	ŔŔ		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		=]	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									ŲΠ		
the second section of the location the enter is exhibited a units taking a section of the sectio								+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADD ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT, FEE	
	If the "Highest Nu	mber Previously P mber Previously Pa	aid For IN THI	S SPACE	is less tha	n 3, enter "3."		_	ropriate box			
FORM PTO-875 (Ray, 8/01) Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE												COMMERCE